



Commonwealth of Massachusetts
**DEPARTMENT OF HOUSING &
COMMUNITY DEVELOPMENT**

Deval L. Patrick, Governor ♦ Timothy P. Murray, Lt. Governor ♦ Tina Brooks, Undersecretary

**TO GENERAL CONTRACTORS
CONSTRUCTION CONTRACT SUBMISSION PACKAGE
FOR CONTRACTS \$100,000 or more**



**BUREAU OF HOUSING DEVELOPMENT AND CONSTRUCTION
PROJECT DEVELOPMENT UNIT**

**General Contractor's please be sure your contract submission is complete
in accordance with the attached checklist and documents.**

**Some of the attached contract forms can also be downloaded from
DHCD'S website at
www.mass.gov/dhcd/**

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GENERAL CONTRACTOR CONTRACT DOCUMENT PROCESSING CHECKLIST

PLEASE COMPLETE AND SUBMIT THE FOLLOWING ENCLOSED DOCUMENTS

1. OWNER/CONTRACTOR AGREEMENT & FORM OF CERTIFICATE OF AUTHORIZATION

- ? Three (3) originals on enclosed form;
- ? Three (3) originals completely filled out and fully executed by your company on the enclosed form and attach form to each original Owner/Contractor Agreement;

2. PERFORMANCE AND PAYMENT BONDS¹ – *MUST USE FORMS PROVIDED*

- ? Three (3) originals, fully executed on the enclosed forms in the full amount of the contract issued by a bonding company licensed to do business in the Commonwealth of Massachusetts and whose name appears on the US Treasury Circular;
- ? Bond dates must coincide with general contract date.

3. INSURANCE REQUIREMENTS² - Provide one (1) original and one (1) copy of a Certificate of Insurance or Insurance Binder in each case indicating the following coverage and limits. These certificates shall also indicate that contractual liability coverage is in force, and the XCU exclusions are deleted. The Housing Authority, the Department of Housing and Community Development, the Contractor and all persons furnishing labor or labor and materials for the contract work. shall be named as additional insured.

The Certificate must indicate:

Property Coverage – Builders' Risk

- ? Evidence of Builders' Risk coverage in the full value of the contract.
- ? The name of the Contractor and all persons furnishing labor or labor and materials for the contract work.
- ? The Housing Authority and the Commonwealth of Massachusetts/Department of Housing and Community Development shall be named as additional insured;
- ? Certificate should indicate whether stored materials are covered;
- ? If contract work is rehabilitation of an existing building an Installation Floater will be acceptable with same provisions as above;

Contractor's Commercial General Liability

- | | | |
|---------------------------------|---------------|-------------------|
| ? Bodily Injury & | \$ 1,000,000. | each occurrence |
| Property Damage | \$ 1,000,000. | general aggregate |
| Products & Completed Operations | \$ 1,000,000. | aggregate |
| Personal & Advertising Injury | \$ 1,000,000. | each occurrence |

Worker's Compensation and Employer's Liability Insurance

- | | | |
|-----------------------|-------------|----------------------|
| Worker's Compensation | \$ 100,000. | |
| Employer's Liability | \$ 500,000. | each accident |
| | \$ 500,000. | disease per employee |
| | \$ 500,000. | disease policy |

Vehicle Liability Insurance

- | | | |
|-----------------|---------------|---------------|
| Bodily Injury & | \$ 1,000,000. | each person |
| Property Damage | \$ 1,000,000. | each accident |

¹ Refer to Instructions to Bidders – Article 9 & General Conditions – Article 18

² Refer to Instructions to Bidders – Article 9 & General Conditions – Article 16

4. FORM OF CONTRACTOR'S EQUAL EMPLOYMENT CERTIFICATION

- ? One (1) original of the enclosed form indicating the percentage ratio of minority employee man-hours in each job category as required **Section 00.73.36** of the Contract Specifications.

5. STATEMENT OF MANAGEMENT CONTROLS

- ? A Statement of Management Controls one prepared and signed by the general contractor and one prepared and signed by an independent certified public accountant certifying the requirements set forth in Article 13 of the General Conditions. **Sample letters are enclosed.**

6. FILED SUBCONTRACTS³

- ? Two (2) original, fully executed, Form of Subcontract for all **filed subcontractors** on the enclosed statutory forms.

7. SUBCONTRACTOR'S PERFORMANCE AND PAYMENT BONDS

- ? One (1) original performance and payment bond in the full amount of the Subcontract and made payable to the general contractor. Surety must be licensed to do business in the Commonwealth of Massachusetts and whose name appears on the US Treasury Department Circular;⁴

8. SUBCONTRACTOR'S CERTIFICATE OF INSURANCE

- ? One (1) copy of a Certificate of Insurance for each filed subcontractor for the coverage listed below evidencing the same limits stated in number 3 above and in Article 16 of the General Conditions.
- ? Public and Property Liability Coverage;
- ? Workmen's Compensation and Employer's Liability Coverage;
- ? Vehicle Liability Coverage;

9. SUBCONTRACTOR'S EQUAL EMPLOYMENT CERTIFICATION

- ? One (1) original of the enclosed form from each **filed subcontractor** indicating the percentage ratio of minority employee man-hours in each job category, as required in Section 01100 of the Contract Specifications.

10. M/WBE DOCUMENTATION

- ? Non-Subcontractors - One (1) fully executed subcontract from the M/WBE's with whom you have signed a Letter's of Intent.
- ? Suppliers – One (1) copy of a purchase order or invoice with whom you have signed Letter's of Intent.

<p>COMPLETENESS AND ACCURACY OF THE ABOVE DOCUMENTS WILL ASSURE PROMPT DHCD APPROVAL. DHCD WILL NOT APPROVE THE GENERAL CONTRACT UNTIL ALL DOCUMENTATION IS SUBMITTED AND THE ABOVE REQUIREMENTS ARE SATISFIED.</p>

³ Numbers 6 – 9 not applicable on single trade contracts

⁴ Applicable if GC required bonds on Form for General Bid on projects under \$10M. Subcontractor bonds are mandatory on prequalification projects over \$10M

DHCD GC checklist

c.149 \$100K or more

2/2010